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MBS/PAQ/ama
April 17, 2009

PATENT APPLICATION
DOCKET NO. 2376.2009-000
(PB 03 0004)

APR 2 0 2003

UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: David W. Jenkins and Mark A. Bremner

Application No.:   10/738,911   Group: 2419

Filed: December 17, 2003   Examiner: Mounir Moutaouakil

Confirmation No: 8354

For: METHOD AND APPARATUS FOR ADDING DIGITAL CROSS
CONNECT CAPACITY

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or is being facsimile transmitted to the United States Patent and Trademark Office on:

4/17/09 _____

Date   Signature

Anne Amison

Typed or printed name of person signing certificate

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment for filing in the above-identified application.

☐   Small entity status of this application under 37 CFR 1.9 and 1.27 has been established by a Small Entity Statement previously submitted.

☐   A Small Entity Statement to establish small entity status under 37 CFR 1.9 and 1.27 is enclosed.

The claims fee has been calculated as shown below:

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
					RATE	ADDIT. FEE		RATE	ADDIT. FEE
TOTAL	18	MINUS	* 20	0	X $26	$		X $52	$ 0
INDEP	4	MINUS	** 4	0	X $110	$		X $220	$ 0
☐ FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+ $195	$		+ $390	$

*   not fewer than 20
**   not fewer than 3

TOTAL = $ 0   TOTAL = $ 0

The Application Size Fee has been calculated as shown below:
(Effective for cases filed on or after December 8, 2004)

Actual Sheets (Including current amendment)	Highest No. of Sheets Paid For (At least 100)	No. of Additional Units Required (Increments of 50 sheets)	SMALL ENTITY		OTHER THAN SMALL ENTITY		Payment Sufficient for up to
			Rate	Total Amount Owed	Rate	Total Amount Owed	
			X $135	$[ ]	X $270	$[ ]	[ ] Sheets

Petition for Extension of Time

☐   Applicant hereby petitions to extend the time to respond to the [   ] dated [   ] for [   ] month(s) from [   ] to [   ]. The appropriate fee is set forth below.

Please charge Deposit Account No. 08-0380 for the following fees:

☐ Petition for [   ] month Extension of Time $ _____

☐ Claims Fee $ _____

☐ Application Size Fee $ _____

☐ Other Fees:

$ _____

$ _____

TOTAL: $ _____

A check is enclosed in payment of the following fees:

☐ Petition for [   ] month Extension of Time $ _____

☐ Claims Fee $ _____

☐ Application Size Fee $ _____

☐ Other Fees:

$ _____

$ _____

TOTAL: $ _____

☒ Please charge any deficiency or credit any overpayment in the fees that may be due in this matter to Deposit Account No. 08-0380.

Respectfully submitted,

HAMILTON, BROOK, SMITH & REYNOLDS, P.C.
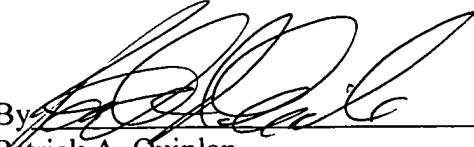
By _____
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Dated: 4/17/09